

# PARTNERSHIP PRESS

Community Tobacco Cessation Partnership  
News and Events

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## What is the Community Tobacco Cessation Partnership?

The Community Tobacco Cessation Partnership (CTCP) is a collaboration of community health clinics, chemical dependency treatment centers, mental health, and homeless service providers who receive training on *Best Practices in Treating Nicotine Addiction* and offer support and resources for people who are uninsured, underinsured, and Medicaid eligible.

## Community Tobacco Cessation Partnership Mission:

To promote, support, and implement quality tobacco cessation support to partnering agencies and sites by incorporating new research and best practices in a way that respects and aligns with existing systems and environments.

## In the News: Snuffin Out Snus

It rhymes with “goose,” and is a Swedish type of smokeless tobacco that’s not your grandfather’s dip or chew. Snus comes in teabag-like pouches that a user sticks between the upper lip and gum, leaves there for up to 30 minutes and discards without spitting.



As no-smoking laws sweep the nation and cigarette sales continue to fall, Big Tobacco is alarming the public health community by devising other ways to try to make tobacco appealing. With smokeless products representing the only booming part of the U.S. tobacco market, snus is an effort to boost sales with a product that — unlike most smokeless ones — doesn’t require users to spit out the residue. Snus also represents something more: an attempt to move smokeless tobacco beyond stereotypical users such as baseball players and rodeo cowboys, and into offices or restaurants where people want a nicotine fix but can’t light up.

Public health advocates aren’t smiling. Although some say smokeless tobacco poses fewer health risks than cigarettes, they note that it has been linked to various types of cancer and warn against using any tobacco product. Snus containers carry one of three required warning labels that say the product is either “not a safe alternative to cigarettes,” “may cause mouth cancer” or “may cause gum disease and tooth loss.”

The research is still out about the relative safety of snus when compared to smoking, but remember:

- smoking is one of the most dangerous things you can do, so it’s not really a fair comparison of risk
- snus is a proven carcinogen, showing increased risks of cancer of the pancreas and oral cavity
- snus can cause hypertension, and increases the risk of fatality from heart attacks
- contains nicotine and is highly addictive
- if you are thinking about quitting tobacco, use nicotine gum or patches instead, they do not contain harmful, cancer-causing chemicals
- talk to your doctor or call the Washington Tobacco Quit Line at 1-800-QUIT NOW or in Spanish 1-877-266-3863 between 5:00 AM and 9:00 PM PST

*USA Today, 7 August 2007*





## FDA Regulation of Tobacco Passes House, Still Not Perfect

A bill for FDA regulation introduced by Representative Henry Waxman (D-CA) passed out of the House of Representatives, but is likely to stall in the Senate. The bill is a beacon to many supporters, including Campaign for Tobacco Free Kids, because it restricts advertising and product claims by tobacco companies as well as give the FDA authority to restrict additives and reduce the amount of nicotine in tobacco products.

However, the fact that the US's largest tobacco seller Philip Morris is among the bill's supporters is a sign that the bill is not a cure all for the harms of smoking and other tobacco products. Seven former federal health secretaries – both democrats and republicans -- are among those who oppose the bill. In a letter to the House this spring, they pointed out that the bill did not prohibit menthol flavoring even though it prohibited all other cigarette flavors. Menthols are the preferred cigarettes of the African American community, with 3 out of 4 smokers choosing the minty taste.

African American teens also frequently begin smoking with menthols.

Other worries from health groups about the bill include that the FDA's plate is already full and they would not have the resources to regulate tobacco properly and that federal regulation of the bill may be seen as approval of a deadly product. Also, the bill does not allow the FDA to remove addictive nicotine completely from products or ban tobacco altogether.

For now, those anxious about the bill are most likely safe. A senator from a tobacco state, Richard Burr (R-NC), has said he will block the bill if the Senate debates it. Also, President Bush has said he will probably veto the bill if it passes while he is in office.

## Interview Spotlight - Beverly Price

**Name:** Beverly Price LPN, Family Practice

**Organization:** Seattle Indian Health Board

**How did you come to work for the Seattle Indian Health Board Clinic?**

I had been working on fishing boats up in Alaska, I felt that was a nice change of pace but then decided to get back into nursing and took a job at Virginia Mason then came to the SIHB in 1982. I've been here forever!

**How long has tobacco been part of your job?**

Ever since I attended an in-service workshop led by Whitney Taylor about ten years ago. I was required to lead a group of some kind as a part of my school requirement, and a tobacco cessation group was the perfect fit.

**What is your favorite part of your work?**

Getting involved, getting to know entire families and all the generations. You really get to know the patients.

**What is most challenging?**

Taking care of logistics in the clinic - staffing and training issues. Basic clinical routines that come before anything else that can push other items off my plate.

**What inspires you when you are running low on motivation?**

Being able to relate to my clients and their needs, and wanting to help them.

**Anything else you want to say?**

I appreciate the help, service and outreach that the Community Tobacco Cessation Partnership has provided, it helps to keep me going!



## Resources:

**Public Health - Seattle & King County Tobacco Prevention Program:**

[www.TobaccoPrevention.org](http://www.TobaccoPrevention.org)

**QUIT LINE**

[www.quitline.com](http://www.quitline.com)

**1-800-QUIT NOW/1-800-784-8669 English**

**1-877-2NO FUME/1-877-266-3863 Spanish**

## Medicaid

## Medicaid Update

Medicaid covers counseling, prescription medication (Zyban, Chantix) and non-prescription medication (patches and gum) through the Quit Line. For questions call 1-800-562-3022 or 1-800-QUIT-NOW.

Medicaid clients must register by calling the Quitline first to access services.